Case 23-18253-ABA Doc 21 Filed 01/18/24 Entered 01/18/24 14:53:05 Desc Main Document Page 1 of 7

Fill in this info	ormation to identify your	case:	
Debtor 1	Tonya L. Honey		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
United States	Bankruptcy Court for the:	DISTRICT OF NEW JERSEY	
Case number	23-18253		
(if known)			

■ Check if this is an amended filing

	ficial Form 106Sum		
Be a	mmary of Your Assets and Liabilities and Certain Statistical Information is complete and accurate as possible. If two married people are filing together, both are equally responsible formation. Fill out all of your schedules first; then complete the information on this form. If you are filing amender original forms, you must fill out a new Summary and check the box at the top of this page.	r supplyin	
Par	t 1: Summarize Your Assets		
		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	231,850.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	21,136.12
	1c. Copy line 63, Total of all property on Schedule A/B	\$	252,986.12
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	118,405.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	231,613.00
	Your total liabilities	\$	350,018.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,024.05
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	3,601.46
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	, family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	box and s	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Case 23-18253-ABA Doc 21 Filed 01/18/24 Entered 01/18/24 14:53:05 Desc Main Document Page 2 of 7

Debtor 1 Tonya L. Honey Case number (if known) 23-18253

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______\$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	150,324.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	150,324.00

Case 23-18253-ABA Doc 21 Filed 01/18/24 Entered 01/18/24 14:53:05 Desc Main Document Page 3 of 7

	in this information to identify your optor 1 Tonya L. Ho									
Del	otor 2	моу								
	buse, if filing)									
Uni	ted States Bankruptcy Court for the	e: DISTRICT OF NEW J	IERSEY		_					
	se number 23-18253		-			Ch	eck if this is	:		
(II KI	iown							ent showin	g postpetition	
\sim	fficial Form 1001						13 income	as of the fo	ollowing date:	
	fficial Form 106l chedule I: Your Inc						MM / DD/ Y	YYYY		
sup spo atta	as complete and accurate as pos plying correct information. If you use. If you are separated and you ch a separate sheet to this form. tt:	i are married and not fili ur spouse is not filing w On the top of any additi	ng jointly, and your ith you, do not inclu	spouse ide infor	is living mation	g wi abo	th you, incl out your sp	ude inforr ouse. If m	nation about ore space is	your needed,
1.	Fill in your employment		5.1.				5.17			
	information.		Debtor 1						iling spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed			☐ Employed ☐ Not employed				
	employers.	Occupation	clerk							
	Include part-time, seasonal, or self-employed work.	Employer's name	Burlington Coa	t Factor	у					
	Occupation may include student or homemaker, if it applies.	Employer's address	1830 Route 130 Burlington, NJ							
		How long employed t	here? 4 mont	hs						
Pa	t 2: Give Details About Mo	nthly Income								
	mate monthly income as of the cuse unless you are separated.	late you file this form. If	you have nothing to r	eport for	any lin	e, wi	rite \$0 in the	space. In	clude your noi	n-filing
	u or your non-filing spouse have me space, attach a separate sheet to		ombine the informatio	n for all e	employ	ers f	or that perso	on on the li	nes below. If y	you need
					F	or D	ebtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$_		765.40	\$	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$_		0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$		765.40	\$	N/A	

765.40

N/A

Deb	tor 1	Tonya L. Honey	_	•	Case number (f known)	23-18	3253		
					For Debtor	1		Debtor -filing s		
	Copy	y line 4 here	4.		\$ 7	65.40	\$		N/A	<u> </u>
5.	l ist	all payroll deductions:								
0.	5a.	Tax, Medicare, and Social Security deductions	5a		\$	72.76	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	·		N/A	
	5c.	Voluntary contributions for retirement plans	5c		\$	0.00	* * —		N/A	
	5d.	Required repayments of retirement fund loans	5d	l.	\$	0.00	\$		N/A	
	5e.	Insurance	5e) .	\$	0.00	\$		N/A	<u> </u>
	5f.	Domestic support obligations	5f.		\$	0.00	\$		N/A	
	5g.	Union dues	5g		\$	0.00	\$_		N/A	
	5h.	Other deductions. Specify:		1.+	\$	0.00			N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	72.76	. \$		N/A	<u>4</u>
7.	Calc	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$6	92.64	. \$		N/A	<u> </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total								
		monthly net income.	8a		\$	0.00	. \$		N/A	
	8b.	Interest and dividends	8b).	\$	0.00	. \$		N/A	<u>4</u>
	8c.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d		\$	0.00			N/A	
	8e. 8f.	Social Security Other government assistance that you regularly receive	8e) .	\$	0.00	. \$		N/A	<u>4</u>
	OI.	Include cash assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	ce 8f.		\$	0.00	\$		N/A	A
	8g.	Pension or retirement income	8g	J.	\$ 2,4	23.41	\$		N/A	
	8h.	Other monthly income. Specify: NJ Public Partnership	8h	1.+	\$ 1,0	08.00	+ \$		N/A	4
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	:	\$3,4	31.41	\$		N/	/ A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	4,124.0	5 + \$		N/A	= \$_	4,124.05
11.	Inclu other Do n	e all other regular contributions to the expenses that you list in <i>Schedu</i> , de contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify: Contribution from mom, brother and son	ur depe		, ,		•	Schedule 11.		900.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certains						12.	\$	5,024.05
13.		ou expect an increase or decrease within the year after you file this for	m?						Comb month	ined nly income
		No.								
		Yes. Explain: Debtor's hours at Burlington store have been re hours at Burlington will increase again.	educe	ed	post-holida	y seas	son. D	ebtor is	s unsı	ure if her

Official Form 106l Schedule I: Your Income page 2

						•		
Fill	in this informat	tion to identify yo	our case:					
Deb	tor 1	Tonya L. Hor	ney				c if this is:	
						_	An amended filing	
	tor 2 ouse, if filing)							ving postpetition chapter the following date:
Unit	od Statos Bankri	untay Court for the	· DISTRI	CT OF NEW JERSEY		_	MM / DD / YYYY	
		. ,	. DISTRI	CT OF NEW SERSET		'	WINT DO / TITL	
	e number 23 nown)	3-18253						
Ľ								
Of	fficial Fo	rm 106J						
		J: Your I	Exner	1989				12/15
Be a	as complete a	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this				
		,		11.				
Par 1.	Is this a join	ibe Your House it case?	hold					
	■ No. Go to							
	☐ Yes. Doe s	s Debtor 2 live i	n a separ	ate household?				
		-	t tile Ottie	ial Form 106 L 2. Evnance	for Congrete House	abald of Dabte	or 0	
			st file Offic	ial Form 106J-2, <i>Expenses</i>	rior Separate House	enola of Debto	or 2.	
2.	•	e dependents?	☐ No					
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents i	names.			Son		28	■ Yes
					Brother		51	□ No ■ Yes
								□ No
					Mother		75	■ Yes
								□ No
•	D							☐ Yes
3.	, ,	enses include f people other tl	han	No				
		d your depende		Yes				
Par	t 2: Estima	ate Your Ongoi	ng Month	ly Expenses				
exp				uptcy filing date unless y y is filed. If this is a supp				
Incl	lude expense:	s paid for with r	non-cash	government assistance i	f you know			
the		n assistance and		cluded it on Schedule I: \			Your exp	enses
(0		···,						
4.		r home owners ad any rent for the		nses for your residence. I or lot.	nclude first mortgag	e 4. \$		862.46
	If not includ	ed in line 4:						
	4a. Real e	state taxes				4a. \$		400.00
	4b. Proper	rty, homeowner's				4b. \$		144.00
				upkeep expenses		4c. \$		100.00
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00 0.00
J.	Additional	igage payille	i Ui yi	our rootaction, aucti as 110	o oquity idalio	υ. φ		0.00

Deb	or 1 Tonya L. Honey	Case numl	ber (if known)	23-18253
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	400.00
	6b. Water, sewer, garbage collection	6b.	\$	20.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	335.00
	6d. Other. Specify:	6d.	\$	0.00
	Food and housekeeping supplies		\$	420.00
	Childcare and children's education costs	8.	\$	0.00
	Clothing, laundry, and dry cleaning	9.	\$	50.00
١.	Personal care products and services	10.	\$	50.00
	Medical and dental expenses	11.		25.00
	Transportation. Include gas, maintenance, bus or train fare.		•	
	Do not include car payments.	12.	\$	200.00
	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
	Charitable contributions and religious donations	14.	\$	0.00
	Insurance.			
	Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.		206.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	289.00
	15d. Other insurance. Specify:	15d.	\$	0.00
	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:	16.	\$	0.00
	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	•	0.00
	17b. Car payments for Vehicle 2	17b.	·	0.00
	17c. Other. Specify:	17c.	\$	0.00
	17d. Other. Specify:	17d.	\$	0.00
	Your payments of alimony, maintenance, and support that you did not report as		•	0.00
	deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	·	0.00
١.	Other payments you make to support others who do not live with you.		\$	0.00
	Specify:	19.		
١.	Other real property expenses not included in lines 4 or 5 of this form or on Scheo	<i>auie I: Yo</i> 20a.		0.00
	20a. Mortgages on other property			0.00
	20b. Real estate taxes	20b.	•	0.00
	20c. Property, homeowner's, or renter's insurance	20c.		0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	*	0.00
	20e. Homeowner's association or condominium dues	20e.	· -	0.00
	Other: Specify:	21.	+\$	0.00
	Calculate your monthly expenses			
-	22a. Add lines 4 through 21.		\$	3.601.46
	22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	<u> </u>
			\$ ———	2 604 46
	22c. Add line 22a and 22b. The result is your monthly expenses.		Ψ	3,601.46
	Calculate your monthly net income.			
	23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	5,024.05
	23b. Copy your monthly expenses from line 22c above.	23b.	-\$	3,601.46
	On the second of			1,422.59
	23c. Subtract your monthly expenses from your monthly income.	23c.	\$	

Explain here: Debtor is in need of front and rear brakes, and a tune-up of her 2006 Camry.

Yes.

Fill in this info	mation to identify your	case:		
Debtor 1	Tonya L. Honey			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF NEW JER	SEY	
Case number	23-18253			
(if known)				

■ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have rethat they are true and correct. X /s/ Tonya L. Honey Tonya L. Honey	read the summary and schedules filed with this declaration and X Signature of Debtor 2
Signature of Debtor 1	-9